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### A Summary of Other States

The information presented below was largely collected via a short survey conducted through the National Association of State Units on Aging (NASUA) in November 2007. The states listed below reported that they had conducted a statewide aging study within the last five years.

#### Arizona

Study Report: *Aging 2020* [[www.azgovernor.gov/seniors](http://www.azgovernor.gov/seniors)]

#### Scope and Methods:

A series of focus groups was conducted around the state.

Cost and Funding Sources: Paid \$30,000 for the Center for Civic Participation to do the invitations, facilitate the sessions, and transcribe the results of 40 public forums. Used sponsorship and donation funds to cover the cost.

#### Contact Person:

Melanie Starns, [mstarns@az.gov](mailto:mstarns@az.gov), Governor's Office on Aging

#### Connecticut

Study Reports: *Long Term Care Needs Assessment, 2007* and *Balancing the System: Working Towards Real Choice for Long-Term Care in Connecticut*  
[[http://www.cga.ct.gov/coa/incl\\_longtermcare.htm](http://www.cga.ct.gov/coa/incl_longtermcare.htm)]

#### Scope and Methods:

A team of researchers from the University of Connecticut Health Center's Center on Aging oversaw the design and implementation of the project. In addition to carrying out a comprehensive literature review on both Connecticut-specific and national data, Center on Aging staff conducted statewide mail, telephone and in-person surveys of both Connecticut residents and providers of long-term care services. Project staff also conducted a full review of Connecticut's existing array of services and long-term care system rebalancing efforts. In order to help identify structural strengths, weaknesses and gaps in the current system, and to compare Connecticut's rebalancing progress to that of other states, the research team hired as consultants Dr. Robert Kane and Dr. Rosalie Kane from the University of Minnesota (national experts).

#### Cost and Funding Sources:

Payment was made from funds authorized by the state legislature through the Commission on Aging (\$300,000) and \$80,000 from the Ombudsman program.

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### Contact Persons:

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## Colorado

### Study Reports: *Strengths and Needs Assessment of Older Adults*

[<http://www.cdhs.state.co.us/aas/PDFs/NeedsAssessment.pdf>]

### *Status of Older Adults in Colorado*

[<http://www.cdhs.state.co.us/aas/PDFs/StateStatus.pdf>]

### Scope and Methods:

The *Strengths and Needs Assessment of Older Adults in the State of Colorado* was a 20-minute telephone survey of 8,903 older adults developed in collaboration with the Denver Regional Council of Governments, Colorado Division of Aging and Adult Services, and Boulder County Aging Services. The report was intended to enable the state of Colorado, local governments, and other policymakers to understand more accurately and predict the services and resources needed to serve the increasing aging population. The objectives of the report were to: identify the strengths (e.g., volunteering, civic engagement, taxes) and articulate the needs of older adults in Colorado; develop estimates of and projections for the cost of meeting the needs; and provide useful, timely and important qualitative and quantitative information for planning, resources development and advocacy efforts. Important features of the study included: (1) Spanish translation of survey and Spanish speaking survey takers; (2) information examined by gender, ethnicity, age and income; and (3) key informant interviews from professionals, legislators and advocates in rural areas.

The *Status of Older Adults in Colorado* is a summary of the key findings of the *Strengths and Needs Assessment of Older Adults in the State of Colorado*. This statewide report identifies the concerns and strengths of older adults in the areas of housing, finances, safety, nutrition, mental health, well-being, health, social and civic engagement, transportation, assistance with everyday activities and caregiver support. Each of the 16 Area Agencies on Aging (AAAs) received a summary report specific to its region and projections with recommendations for its use. The 19 counties that had 100 or more telephone survey responses completed received their own report as well.

Cost and Funding Sources: Colorado contracted with the National Research Center (NRC) in Boulder for about \$500,000 —using some state funding, funding (mostly Foundation supported) from the Denver Regional Council of Government (the largest AAA in the Colorado), and funding from several other foundations.

### Contact Persons:

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### **Florida**

Study Report: *Assessing the Needs of Elder Floridians, 2004*  
[<http://elderaffairs.state.fl.us/english/Stats/AssessNeeds.html>]

#### Scope and Methods:

The data needed to prepare this report came mainly from two sources: A Statewide Needs Assessment Survey of Older Floridians and small area Census Bureau tabulations prepared specially for the Planning and Evaluation Unit of the Florida Department of Elder Affairs. Many other sources were used for specific items, such as the number of elder Floridians who receive Food Stamps or the number of nursing home beds in a particular county. The Florida Department of Elder Affairs conducted a statewide survey to measure the needs of residents age 60 and older who were not already clients—focusing on 14 areas of need: living situation; self-care limitations; household management tasks; caregiving; health and health promotion; information and assistance; nutrition; senior centers; transportation; advocacy and perspective on aging; housing; abuse, neglect and exploitation; volunteerism; and employment. The Department used the Survey Research Center at the Bureau of Business and Economic Research at the University of Florida to assist with the survey—with a target of completing 100 surveys for each of Florida’s 11 Planning and Service Areas (over-sampling for “hard-to-reach” rural, poverty and minority populations).

Cost and Funding Sources: It cost about \$30,000 [source not identified].

#### Contact Persons:

Horacio Soberon-Ferrer, [Ferrerh@elderaffairs.org](mailto:Ferrerh@elderaffairs.org), 850-414-2089

### **Georgia**

Study Report: *State Plan on Aging, Federal Fiscal Year 2008 – 2011* [see <http://aging.dhr.georgia.gov/portal/site> ]

#### Scope and Methods:

As a part of the state strategic planning process, the Georgia Division of Aging Services (DAS) collaborated with Georgia State University and Kennesaw State University on a project to solicit and collect representative public input. The primary project objectives were to ascertain the level of consumer knowledge about programs and services provided through DAS, the perceived value of and barriers to DAS programs and services, as well as to obtain consumer suggestions for recommended improvements to the service delivery system and ideas for new DAS initiatives.

Target Constituent Populations included:

- Citizens over age 60
- Citizens age 50-60

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- People with disabilities
- Family members and other caregivers who assist seniors or persons with disabilities
- Professional providers of services to seniors and the disabled
- Other consumers of services offered by DAS
- Nursing facility and personal care home residents
- Area Agencies on Aging

Survey Methods included: statewide public hearings, focus groups, web and mail surveys, in-person interviews, and telephone surveys.

Cost and Funding Sources: \$135,369 [Program Administrative Funds]

Contact Persons:

Sharise Thurman, [svthurman@dhr.state.ga.us](mailto:svthurman@dhr.state.ga.us), 404-657-5281

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## Illinois

Study Report: *The Maturing of Illinois: Getting Communities on Track for an Aging Population* [no related web-site; assessment is not yet complete]

Scope and Methods:

The Illinois Association of Area Agencies on Aging (I4A) developed a community assessment tool to create a “snapshot” of communities. It was developed based on community assessment surveys conducted by AARP and the Michigan Community Toolkit for a Lifetime. The I4A Assessment Tool was designed for use by trained interviewers conducting interviews with key informants, conducting field observation and research, or by a combination of these methods. This survey was not designed for distribution to groups or individuals to complete on their own.

Cost and Funding Sources: Not available

Contact Persons:

Michael J. O'Donnell, Executive Director, East Central Illinois Area Agency on Aging, 1003 Maple Hill Road, Bloomington, IL 61704, 309-829-2065 (ext. 210), [MODONNELL@eciaaa.org](mailto:MODONNELL@eciaaa.org)

Becky Schedin, the Area Agency on Aging of Suburban Cook County, 1048 Lake Street, Suite 300, Oak Park, Illinois 60301, 708-383-0258, [becky.schedin@ageoptions.org](mailto:becky.schedin@ageoptions.org)

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### **Indiana**

Study Report: [Not yet published.]

Scope and Methods:

Indiana is in the midst of a three-year study, having conducted training for communities in preparation for a statewide survey of 4,500 older citizens, which will begin in January. They also conducted interviews with multiple state units to learn about impact of demographics and preparation currently being done. This has not been published yet. The project is using a survey process designed by The AdvantAge Initiative of the Center for Home Care Policy and Research, Visiting Nurse Service of New York [<http://www.vnsny.org/advantage/>] focused on four components of an “elder-friendly community”—addressing basic needs, optimizing physical health and well-being, maximizing independence for the frail and disabled, and promoting social and civic engagement. The survey uses 33 indicators that communities can use to measure how well they are meeting the needs and aspirations of their older residents. The AdvantAge Initiative started as a national survey and now being conducted under contract by various communities across the country. For a couple of communities in Indiana that participated earlier (in the original national project) and a more recent one as well, visit: <http://www.cicoa.org/TheAdvantAgeInitiative/TheAdvantAgeInitiative.html>

<http://www.cfsjc.org/publications/research.cfm>

Cost and Funding Sources:

The Center on Aging and Community at Indiana University has received about \$38,000 annually in a contract with the State Department on Aging. This offsets a research salary at 10%, pays for a graduate student assistant researcher, and pays for training for aging personnel around Indiana. This has been derived from the U.S. Administration on Aging Planning Demonstration Grant. In the coming year, we will expend around \$300,000 additional funds for the survey and this is funded by new State money, the AAAs, and private foundations.

Contact Person:

Philip B. Stafford, Ph.D., [staffor@indiana.edu](mailto:staffor@indiana.edu)

### **Kentucky**

Study Reports: *The Kentucky Elder Readiness Initiative*  
[[www.mc.uky.edu/gerontology/keri.htm](http://www.mc.uky.edu/gerontology/keri.htm)]

Scope and Method:

The Kentucky Elder Readiness Initiative (KERI), announced in August 2005, is a collaborative venture involving the Department of Aging and Independent Living of the

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Cabinet for Health and Family Services, the University of Kentucky Graduate Center for Gerontology, and each of the Commonwealth's 15 Area Agencies on Aging. The goal of KERI is to foster statewide awareness, dialogue and insight into the challenges and opportunities provided by the aging of the "Baby Boom" population and to stimulate local and statewide initiatives to appropriately address the changes that will result from their aging. Initial KERI activities involved assembling background information on Kentucky's elders and on the characteristics of the Baby Boomers. A series of Fact Sheets summarizing this information for each Area Agency on Aging (AAA) were prepared. In the summer of 2006, two focus groups (one with community leaders and one with providers) and an open community forum were conducted in each of the 15 AAAs. Findings from the focus groups were incorporated into a statistically representative statewide survey, sent to 9,600 Kentucky residents in the summer of 2007. At this point in excess of 2,800 responses have been received. These data are now being analyzed and a series of reports will be developed—one for each Area Agency on Aging—that will summarize the findings and provide a set of observations and recommendations for ways in which each region of the state might effectively begin to respond to the challenges and opportunities provided by the aging of its Baby Boom population. The reports will provide a framework for the next phase of KERI, the development and initiation of locally appropriate projects and activities aimed at enhancing the environment in which current elders and the Baby Boomers who follow them will grow old.

### Cost and Funding Sources:

Phase I & II - \$234,280 [source not available]

Phase III & IV – Have requested \$1.2 million for taking the information provided by the study and developing plans for each of Kentucky's 120 counties, to be completed by the Area Agencies on Aging.

### Contact Person:

Bill Cooper, Kentucky Department for Aging and Independent Living, 502-564-6930, Bill.cooper@ky.gov

## Minnesota

### Study Reports: *Transform 2010* (basic demographic)

[[http://www.dhs.state.mn.us/main/idcplg?IdcService=GET\\_DYNAMIC\\_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id\\_054450](http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_054450)]

### *Survey of Older Minnesotans* (telephone survey)

[<http://www.mnaging.org/advisor/survey.htm>]

### Scope and Methods:

*Transform 2010* follows the general methodology of an earlier project (*Project 2030*).

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1. At the state level background materials were developed to frame the issues (see fact sheets, county profiles, etc. at above website).
2. North Carolina's work on livable and senior-friendly communities was featured at a state-level forum called, Boomers Mean Business.  
[http://www.dhs.state.mn.us/main/idcplg?IdcService=GET\\_DYNAMIC\\_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id\\_057723](http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_057723)
3. Regional meetings, co-sponsored by AAAs and local businesses, invited key leaders and community stakeholders to facilitated discussions about impacts on the local community.
4. The themes and major topics from these community-level meetings were summarized into the *Blueprint*.
5. Meanwhile 22 state agencies identified a liaison for this project—and each liaison was responsible for going back to their state agency to identify the impacts of the demographic shift on their agency's business.
6. This has created any number of local and regional studies, projects, initiatives and other spin-offs—more around the themes of Communities for a Lifetime and Age-Friendly Communities. Some of these have been funded with foundation dollars, some supported by AAAs, some funded by communities themselves—and combinations of these. I would venture that at least half of them have been primarily volunteer.

*Survey of Older Minnesotans*—In 2005 the Minnesota Board on Aging (MBA) contracted with an independent firm (Clearwater Research, Inc. in Boise Idaho) to conduct a statewide telephone survey of persons aged 50 and over in Minnesota. The MBA conducts such a survey approximately every five years to monitor the changing needs, assets and expectations of older persons in the state and uses this information to improve the design and targeting of public programs for older persons and to help researchers and policymakers better understand Minnesota's older population.

The survey includes questions in the following general areas:

- Economic status—working, income sources, assets, attitudes about work/retirement
- Health status—general health, activities of daily living, transportation
- Housing status—own/rent, accommodations needed, living arrangements, planning to move, housing conditions
- Family/social status—children, friends, sources of support, community and personal concerns

Cost and Funding Sources: *Transform 2010* was done almost entirely by in-house staff. *Survey of Older Minnesotans* costs between \$150,000 and 200,000—the sources depend on the year it is done, some public, and some private philanthropy.

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### Contact Persons:

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Hal Freshley – *Survey of Older Minnesotans*, Minnesota Board on Aging, [hal.b.freshley@state.mn.us](mailto:hal.b.freshley@state.mn.us), 651-431-2562

## Nevada

### Study Report: Strategic Plan for Senior Services

[<http://dhhs.nv.gov/shcp/FinalSeniorPlan.pdf>]

### Scope and Methods:

Between November of 2001 and June of 2002, 2,035 Nevada seniors, service providers, and caregivers for seniors responded to questions about the needs and concerns of seniors in the state. Respondents also indicated which services and resources would be most helpful to seniors. Information was gathered through comment cards, a written survey, and focus groups.

Cost and Funding Sources: Independent contractor completed the study over a year and had a Strategic Plan committee appointed by the governor to work with them. \$100,000 was provided from the 2001 Legislature to complete the study.

### Contact Person:

Carol Sala, Administrator, Nevada Division for Aging Services, 775-687-4210, [csala@aging.nv.gov](mailto:csala@aging.nv.gov)

## New York

### Study Report: State Agencies Prepare for the Impact of an Aging New York

[<http://www.aging.state.ny.us/explore/project2015/report02/index.htm>]

### Scope and Methods:

New York's Project 2015 initiative had several parts, including:

— In 2000, a series of Articles and Briefs were prepared to identify key program, service, and topic areas that were likely to be particularly affected by the impact of the aging of the baby boom population.

— In 2002, New York State government undertook a major, cross-agency effort to identify and analyze the impact of major demographic change on the spheres of work within 36 state government agencies.

While Project 2015 deliberately set aside the issue of resources for the analysis portion of the project (so that funding issues would not constrain innovative thinking), the end results included identification of programs, services, etc. that did not require funds, programs and services that needed increased funding, as well as new program areas to pilot test and fund. From the Project 2015 Guide (which outlines the scope,



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methodology, and key elements of success in implementing the Project 2015 initiative), the following 13 components can be characterized as the major building blocks, or basic framework, of the Project 2015 planning initiative:

1. 36 Participating Agencies: Cabinet-level, selected by the Governor
2. One Lead Managing Agency: Designated by the Governor
3. Dedicated Management Team: Remained constant throughout project
4. Kick-Off Meeting: Initial charge to Commissioners given by the Governor
5. 36 Agencies -Project Designee: Selected by each Commissioner
6. Agency-Specific Work Plans: Completed/submitted 1st month of project
7. Current and Projected Demographic Data: Provided to all agencies
8. Monthly State Agency Work Group Meetings: Attended by all Designees
9. Individualized Technical Assistance: Provided by Management Team
10. Three-Part Brief: Written by each agency
11. White Paper Developed and Printed: Compilation of 36 briefs and articles
12. Governor's Symposium: Project 2015's next steps deliberated
13. White Paper Distributed to Wider Audience: As basis for further discussion

### Cost and Funding Sources:

Project 2015 was conducted by New York State. The cost was approximately \$100,000. There were no designated additional funds for the project. Different costs were absorbed or handled by different state agencies:

- Data projections were prepared, presented and distributed by the New York State Data Center.
- Project management staff were provided by the Office for the Aging.
- Meeting facilitators were provided through the Governor's Office of Employee Relations.
- AV and media costs were provided through the Office for Technology.
- Rooms were provided by the Office of General Services.
- An evaluation of the process was conducted by the New York State Office for the Aging together with the University at Albany' Center for Excellence in Aging.
- Copies of the product were made through the Department of Taxation and Finance.
- Large-print and other meeting materials were prepared by the Office of Advocate for Persons with Disabilities.
- Braille copies of publications were prepared by the Department of Correctional Services.

### Contact Persons:

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## **Texas**

Study Reports: *Aging Texas Well Indicators Survey Results 2005*

[[http://www.dads.state.tx.us/news\\_info/publications/studies/atw\\_results\\_report.pdf](http://www.dads.state.tx.us/news_info/publications/studies/atw_results_report.pdf)]

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### *Survey Responses on the Readiness of State Government to Meet the Challenges of an Aging Texas*

[[http://www.dads.state.tx.us/news\\_info/publications/studies/ReadinessReport.pdf](http://www.dads.state.tx.us/news_info/publications/studies/ReadinessReport.pdf)]

#### Scope and Methods:

##### *Aging Texas Well Indicators Survey Results 2005*

In 1997, Texas began an initiative called *Aging Texas Well* to help Texas prepare for a rapidly increasing older population. In 2004, Texas conducted a project to establish and objectively measure indicators of successful aging based on gerontology literature on “successful aging.” Using these indicators as a framework, a survey was developed to measure how well older Texans are aging. The Survey Research Center (SRC) at the University of North Texas conducted a telephone survey of older adults in Texas. The purpose of the survey was to provide insight into how well older Texans are doing (based on their own self-report) on key indicators of successful aging across the Aging Texas Well areas of focus. A telephone survey was conducted in 2004 to collect the data. A statistically valid sample of 1,110 older Texans living in the community completed the statewide survey. The conceptual population for the survey was adults age 60 or older who live in households with telephones. A stratified random sampling method was used so that the sample would generally reflect the racial and ethnic distribution of older adults in Texas as a whole. Random digit dialing (RDD) was used as the method of sample generation within each area to offer the best coverage of active telephone numbers and reduce sample bias. A total of 1,110 older Texans completed the statewide survey out of a total of 30,060 households contacted (15,680 had no one in the target age, 8,551 never answered and 5,219 refused to participate). The survey instrument was compiled using input from several sources, including a review of similar studies on aging indicators conducted at national level, a review of similar studies on aging indicators conducted by other states or counties, and a review of literature, specifically survey research, for each Aging Texas Well area of focus. The instrument was translated into Spanish. Both instruments were programmed into SRC’s Computer Assisted Telephone Interviewing system for survey administration. The system directs the interview along the appropriate branching patterns based on respondents’ answers.

##### *Survey Responses on the Readiness of State Government to Meet the Challenges of an Aging Texas*

In February of 2001, the Texas Department on Aging’s Office of Aging Policy and Information (OAPI) surveyed 192 state governmental agencies, commissions, and boards listed on the State of Texas website (<http://www.state.tx.us>). A total of 152 agencies completed and returned the survey. Of the responding agencies, 74 indicated they had no specific issues related to aging. The remaining 78 respondents offered insight into their aging issues, current initiatives, future needs, and methods that could be used to measure progress toward preparedness. The next step of the Texas Department on Aging is to help state agencies conduct more detailed self-evaluation of readiness, and to develop an action plan addressing the needs of the growing aging population.

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### Cost and Funding Sources:

The Indicators Survey was conducted by the Survey Research Center (SRC) at the University of North Texas via telephone. This survey was covered by the operating budget of the department. Due to the consolidation of state agencies, no principals with knowledge of the cost of the survey remain in the agency. Anecdotal references to the cost are between \$15,000-\$25,000.

The Survey Responses study was conducted internally by the Texas Department on Aging (the legacy agency of the Department of Aging and Disability Services). Cost of the survey was part of normal operations of the department.

### Contact Person:

Michael Wilson, PhD, Aging Texas Well Coordinator, 512 438 5471,  
[Michael.Wilson@dads.state.tx.us](mailto:Michael.Wilson@dads.state.tx.us)

## **Vermont**

Study Report: *Shaping the Future of Long Term Care and Independent Living, 2006-2016* [<http://www.dail.vermont.gov/dail-publications/publications-annual-reports/shaping-the-future-2006-2016>]

### Scope and Methods:

Vermont's *Shaping the Future of Long Term Care and Independent Living 2006-2016* is a yearly report describing both the need for long term care in Vermont and the use of Vermont's long term care services. This report is in its 5th edition and is intended to be a living document, adjusted annually to reflect changing demographics and trends (such as disability rates, nursing home use rates, and program use rates). Using a model developed jointly by The Lewin Group and Vermont that incorporates both demographic and program use data, Vermont is able to project the need for long term care services and make recommendations for addressing that need. By using a rolling 10-year forecast of long term care need and use, Vermont continually plans and adjusts for the future.

Cost and Funding Sources: Cost varies depending on the year. Funded by the Vermont Department of Disabilities, Aging & Independent Living.

### Contact Person:

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## **Washington**

Study Reports: *Interim Report to the Governor and Legislature—Joint Task Force on Long-Term Care Financing and Chronic Care Management* [[http://www.governor.wa.gov/ltctf/reports/ltctf\\_interim\\_report\\_200701.pdf](http://www.governor.wa.gov/ltctf/reports/ltctf_interim_report_200701.pdf)] The final Long-Term Care Task Force report is due at the end of 2007 and will be posted at this website.

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### Scope and Methods:

The Washington State Legislature passed legislation in July 2005 establishing a Task Force on Long-Term Care Financing and Chronic Care Management. The legislation directed the Task Force “to develop recommendations for the Governor and appropriate committees of the Legislature to improve the State’s ability to support the delivery of long-term care services that meet the current and future needs of its citizens.” The Task Force appointed three Advisory Committees to provide support in developing short-term and long-term recommendations around enhancing existing long-term care, health care and support services. The three Advisory Committees included Current System Evaluation, Chronic Care Management and Disease Prevention, and New Funding Models. The Advisory Committees met six times over the course of 2006 and concluded their deliberations with recommendations for the Task Force’s consideration in September. The Task Force held four working meetings (in November 2005, and March, October, and November 2006) and three Town Hall meetings (May, July and October 2006), including one with Tribal representatives. Through an RFP process, the Task Force chose The Lewin Group to provide consulting services for the Task Force and to coordinate the Task Force and Advisory Committee meetings. Lewin and its partners assisted the Task Force through its Advisory Committees with a review of the current system and the exploration of alternative public and private financing options, with a focus on chronic care management and disability prevention interventions. Lewin conducted research from a variety of sources to outline the composition of a current and future LTC system and to identify payment models that leverage/maximize existing public funding, as well as identify private and public-private financing options that support LTC systems.

### Cost and Funding Sources:

Washington State contracted with the Lewin Group to conduct the study. The State Legislature appropriated approximately \$400,000 for the study.

### Contact Person:

Denise Gaither, [gaithds@dshs.wa.gov](mailto:gaithds@dshs.wa.gov), 360- 725-2262

## **Wisconsin**

### Study Report: *Profiles of Older Wisconsin Residents*

[<http://dhfs.wisconsin.gov/aging/demographics/profiles.pdf>]

### Scope and Methods:

It was a statewide simple random sample survey of 1,453 individuals age 65 or older, conducted by telephone using computer-assisted telephone interviewing (CATI) technology. Topics included basic demographics, health status, economic well-being, housing and residential options, connections to people and programs, and older caregivers. The results were published in a report available both in print and online, and

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were used to produce a series of six topical presentations with PowerPoint slideshows, as well as a series of six two-page topical briefs that are used as handouts.

### **Cost and Funding Sources:**

The survey was administered by the Wisconsin Department of Health and Family Services through its (then) Bureau of Aging and Long Term Care Resources, through a contract with the University of Wisconsin Survey Center which staffed the interviews. Costs included approximately 50% of one staff FTE for one year, plus approximately \$177,000 for the contract with the Survey Center. Of this, \$100,000 came from state general purpose revenue, and the remainder from Older Americans Act Title III funds.

### **Contact Person:**

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